

Exhibit 1

Abatement Plan for Addressing the Opioid Crisis in Lake County and Trumbull County

Expert Witness Report of G. Caleb Alexander, MD, MS

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II. DATA SOURCES, METHODOLOGY AND OPINIONS

11. In preparing this report, I reviewed materials from a number of sources, including: Bates-stamped documents and deposition testimony in this case provided to me by counsel; published reports regarding the epidemic; information derived from other local and national sources; and peer-reviewed literature, whitepapers, reports from public health authorities, non-profit organizations, and other publicly available sources. I, along with some of my team members, have also spoken with local stakeholders including:

- Lauren Thorp, MS, Director of Recovery & Youth Programs at Trumbull County Mental Health & Recovery Board
- April Caraway, Executive Director at Trumbull County Mental Health & Recovery Board
- Kim Fraser, MS, Executive Director at Lake County Board of Alcohol, Drug Addiction and Mental Health Services

Many of my findings are based on prior investigations that my team and I have either performed or synthesized, such as knowledge contained in **Appendix A** and in citations such as references #1-#54. A complete list of the documents I consulted in preparing this report is provided as **Appendix D**.

12. Several prior reports, such as the Community Health Improvement Plans for Lake⁵⁵ and Trumbull⁵⁶ Counties, Trumbull County Community Health Assessments,^{57,58} Ohio Substance Abuse Monitoring (OSAM) Network reports,⁵⁹ and the Recovery Ohio Advisory Council Initial Report⁶⁰ are relevant to my report given their authorship and focus. The population estimates presented in my Redress Models, enclosed as **Appendix E**, are derived from data from local government entities (e.g., Ohio Department of Mental Health and Addiction Services [OhioMHAS]), federal agencies (e.g., Centers for Disease Control and Prevention [CDC], Substance Abuse and Mental Health Services Administration [SAMHSA], Department of Justice), community-based organizations, peer-reviewed publications, and both my and others' expert opinion. The selection of each estimate was driven by the strength of evidence and appropriateness of the data for the specific context at hand. I discuss my approach to evaluating evidence further in Paragraphs #15 and #16. Overall, I took a conservative approach to derive the population estimates included in my Redress Models.
13. The layout of my Redress Models mirrors the layout of this report. For each abatement intervention, I list the estimated size of the target population, how it was derived and the sources that I used. For example, I used data from the United States Fire Administration and Ohio Department of Public Safety to estimate the number of first responders (firefighters, emergency medical technicians [EMTs] and paramedics, and police officers) in the Communities that should be provided with naloxone and trained regarding its use. For each abatement category, I first estimate the size of each relevant population for 2021 and then I project how these populations are likely to change over a fifteen-year period from 2021 through 2035. For example, I project changes in the number of first responders using annual employment growth rates based on data from the Ohio Department of Job and Family Services. More information regarding the sizes of different populations, as well as the methods that I used to project them over time, is provided within the Redress Models.
14. In addition to the Redress Models, I was asked to review the literature on certain potential indicators of high risk opioid distribution and describe their evidence base. See **Appendix F**.
15. In all cases, my review of the scientific evidence base was based on a stepwise process building on the foundation of literature regarding the opioid epidemic that I was already aware of. To supplement this, I reviewed the content of additional academic and governmental studies, including both their reference lists as well as subsequent reports that have cited them. I also reviewed reports such as those discussed in Paragraph #11 for additional sources of scientific information. Finally, in some instances, additional